

- a. ☐ A check in the amount of \$ _____ to cover the above fees is enclosed.
- b. ☒ Please charge my Deposit Account No. 20-1430 in the amount of \$ 10940.00 to cover the above fees.
A duplicate copy of this sheet is enclosed.
- c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 20-1430. A duplicate copy of this sheet is enclosed.
- d. ☐ Fees are to be charged to a credit card. **WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.

SEND ALL CORRESPONDENCE TO:

Kevin Bastian
TOWNSEND AND TOWNSEND AND CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834

SIGNATURE

Kevin Bastian
NAME

34.774
REGISTRATION NUMBER

FEE VALUE	
20 1430	
FEE	
CEN	
1615	100

60739539 v1

04/07/2006 HKAYPAGH 00000158 201430 10526326

01 FC:1615	130.00 DA
02 FC:1615	4050.00 CR
03 FC:1615	6400.00 DA
04 FC:1615	3950.00 DA

Adjustment date: 07/12/2006 ATRAN1
04/07/2006 HKAYPAGH 00000158 201430 10526326
02 FC:1615 4050.00 CR

07/12/2006 ATRAN1 00000007 201430 10526326

01 FC:1615 3950.00 DA